FREDERIC NURSING & REHAB COMMUNITY

205 UNITED WAY

FREDERIC 54837 Phone: (715) 327-4297	•	Ownership:	Corporation
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	50	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	50	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	46	Average Daily Census:	47

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	2/31/04)	Length of Stay (12/31/04)	%
Home Health Care	No	Primary Diagnosis	*	Age Groups	*	Less Than 1 Year	37.0
Supp. Home Care-Personal Care	No					1 - 4 Years	41.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	6.5	More Than 4 Years	21.7
Day Services	No	Mental Illness (Org./Psy)	34.8	65 - 74	8.7		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	30.4		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	39.1	*********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	15.2	Full-Time Equivalen	t
Congregate Meals	No	Cancer	2.2			Nursing Staff per 100 Re	sidents
Home Delivered Meals	No	Fractures	4.3		100.0	(12/31/04)	
Other Meals	No	Cardiovascular	0.0	65 & Over	93.5		
Transportation	No	Cerebrovascular	10.9			RNs	12.4
Referral Service	No	Diabetes	4.3	Gender	%	LPNs	3.9
Other Services	No	Respiratory	6.5			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	37.0	Male	21.7	Aides, & Orderlies	35.2
Mentally Ill	No			Female	78.3		
Provide Day Programming for			100.0	İ			
Developmentally Disabled	No	ĺ		İ	100.0	İ	
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Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other			Private Pay	!		amily Care			anaged Care			
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	1	3.3	158	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	2.2
Skilled Care	1	100.0	321	22	73.3	135	0	0.0	0	10	66.7	165	0	0.0	0	0	0.0	0	33	71.7
Intermediate				7	23.3	112	0	0.0	0	5	33.3	145	0	0.0	0	0	0.0	0	12	26.1
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	1	100.0		30	100.0		0	0.0		15	100.0		0	0.0		0	0.0		46	100.0

FREDERIC NURSING & REHAB COMMUNITY

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	8	As	sistance of	% Totally	Number of
Private Home/No Home Health	9.6	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	3.8	Bathing	0.0		76.1	23.9	46
Other Nursing Homes	7.7	Dressing	10.9		69.6	19.6	46
Acute Care Hospitals	76.9	Transferring	34.8		43.5	21.7	46
Psych. HospMR/DD Facilities	0.0	Toilet Use	26.1		47.8	26.1	46
Rehabilitation Hospitals	1.9	Eating	65.2		21.7	13.0	46
Other Locations	0.0	*******	******	*****	******	*******	*****
Total Number of Admissions	52	Continence		%	Special Treatmen	its	용
Percent Discharges To:		Indwelling Or Extern	nal Catheter	4.3	Receiving Resp	iratory Care	10.9
Private Home/No Home Health	33.3	Occ/Freq. Incontiner	nt of Bladder	60.9	Receiving Trac	heostomy Care	2.2
Private Home/With Home Health	9.8	Occ/Freq. Incontiner	nt of Bowel	26.1	Receiving Suct	ioning	4.3
Other Nursing Homes	11.8	İ			Receiving Osto	omy Care	2.2
Acute Care Hospitals	7.8	Mobility			Receiving Tube	Feeding	2.2
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	2.2	Receiving Mech	anically Altered Diets	8.7
Rehabilitation Hospitals	0.0	į					
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	37.3	With Pressure Sores		4.3	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		6.5	Medications		
(Including Deaths)	51	İ			Receiving Psyc	hoactive Drugs	52.2

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		Own	ership:		Size:		ensure:		
	This	Pro	prietary	50	-99	Ski	lled	Al	
	Facility		Group		Group		Group		lities
	8	%	Ratio	%	Ratio	૪	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.0	81.9	1.15	85.5	1.10	85.9	1.09	88.8	1.06
Current Residents from In-County	69.6	72.8	0.96	71.5	0.97	75.1	0.93	77.4	0.90
Admissions from In-County, Still Residing	21.2	18.7	1.13	20.7	1.02	20.5	1.03	19.4	1.09
Admissions/Average Daily Census	110.6	151.4	0.73	125.2	0.88	132.0	0.84	146.5	0.76
Discharges/Average Daily Census	108.5	151.2	0.72	123.1	0.88	131.4	0.83	148.0	0.73
Discharges To Private Residence/Average Daily Census	46.8	74.0	0.63	55.7	0.84	61.0	0.77	66.9	0.70
Residents Receiving Skilled Care	73.9	95.3	0.78	95.8	0.77	95.8	0.77	89.9	0.82
Residents Aged 65 and Older	93.5	94.3	0.99	93.1	1.00	93.2	1.00	87.9	1.06
Title 19 (Medicaid) Funded Residents	65.2	71.9	0.91	69.1	0.94	70.0	0.93	66.1	0.99
Private Pay Funded Residents	32.6	16.7	1.95	20.2	1.62	18.5	1.77	20.6	1.59
Developmentally Disabled Residents	0.0	0.6	0.00	0.5	0.00	0.6	0.00	6.0	0.00
Mentally Ill Residents	34.8	29.5	1.18	38.6	0.90	36.6	0.95	33.6	1.03
General Medical Service Residents	37.0	23.5	1.57	18.9	1.95	19.7	1.88	21.1	1.75
Impaired ADL (Mean)	47.0	46.4	1.01	46.2	1.02	47.6	0.99	49.4	0.95
Psychological Problems	52.2	54.5	0.96	59.0	0.88	57.1	0.91	57.7	0.90
Nursing Care Required (Mean)	5.2	7.4	0.70	7.0	0.74	7.3	0.71	7.4	0.69